



09169.001955.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: V. Bali
KIERAN GERARD LARKIN ET AL.)
: Group Art Unit: 2623
Application No.: 09/754,310)
: Filed: January 5, 2001)
: For: DEMODULATION AND)
: PHASE ESTIMATION OF)
: TWO-DIMENSIONAL)
: PATTERNS)
: July 12, 2004

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Technology Center 2600

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST TO CORRECT INVENTORSHIP UNDER 37 C.F.R. § 1.48(b)

Sir:

Applicants respectfully request the Commissioner for Patents, under 37
C.F.R. § 1.48(b), to correct the inventorship of the subject application by deleting Donald J.
Bone as an inventor.

The cancellation of non-elected Claims 1-14 and 23-44 in a paper that is
being filed concurrently herewith, necessitates the requested change of

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130.00 DP

I hereby certify that this correspondence is being deposited with the United
States Postal Service as first-class mail in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 12, 2004
(Date of Deposit)

Frank A. DeLucia (Reg. No. 42,476)
(Name of Attorney for Applicant)

Signature

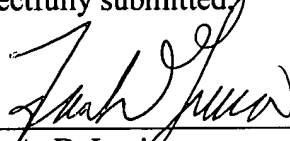
July 12, 2004
Date of Signature

inventorship of this application, since it is understood that Donald J. Bone is not an inventor of the subject matter of the non-canceled claims now remaining in this application. The actual inventors of remaining Claims 15-22 and 45-50 are Kieran Gerard Larkin and Michael Alexander Oldfield, the original first and second named inventors. A Declaration signed by the two remaining inventors, as well as by Mr. Bone, has been filed previously. An updated Application Data Sheet is also submitted herewith, listing only the two correct remaining inventors.

Submitted herewith is a check in the amount of \$130.00, in payment of the fee set forth in 37 C.F.R. § 1.17(i). The Commissioner is authorized to charge any additional fee in connection with this Petition, and to credit any overpayment, to Deposit Account 06-1205.

Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our below listed address.

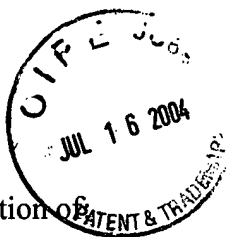
Respectfully submitted,



Frank A. DeLucia
Attorney for Applicants

Registration No. 42,476

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
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In re Application of

Docket No. 00169.001955.

KIERAN GERARD LARKIN ET AL.

Appln. No.: 09/754,310

Examiner: V. Bali

Filed: January 5, 2001

Group Art Unit: 2623

For: DEMODULATION AND PHASE ESTIMATION
OF TWO-DIMENSIONAL PATTERNS

Date: July 12, 2004

Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 14	MINUS	** 45	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 3	MINUS	*** 9	= 0	x \$43 \$86	\$0
Fee for Multiple Dependent claims \$145°/\$290						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

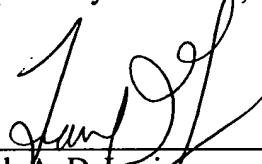
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

- ☐ A check in the amount of \$____ is enclosed.
- ☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
- ☒ A check in the amount of \$ 110.00 to cover the Extension fee for response with a one - month extension is enclosed.
- ☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Frank A. DeLucia
Attorney for Applicants
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